



## Attn: Audiologists

### Instructions for Completing “Results of Diagnostic Audiological Evaluation”

#### I. Original White Copy:

The Audiologist receives the original *white* copy of the “Referral for Diagnostic Audiological Evaluation” as notification of a child needing Diagnostic Evaluation.\*

(The hospital screener is responsible for completing and distributing the original “Referral” to the baby’s physician, audiologist, parents, and Idaho Sound Beginnings, when a child fails 2 screens)

(\*If you see a child for whom you have **not** received a *white* “Referral for Diagnostic Audiological Evaluation” form, see item number III.)

#### II. Documenting Results:

**Identifying Information:** Important for tracking and follow-up.

**Diagnosis:** Record both the Type and Degree of loss for each ear.

**Results:** Indicate *all* tests performed at the Diagnostic Evaluation.

**Recommendations:** Place a checkmark beside each recommendation you made to the parents and the baby’s physician.

**Results Communicated:** Indicate all agencies that received notification if the child was identified with hearing loss or as needing periodic monitoring.

**Signature:** Sign and complete the contact information.

#### III. \*When no white “Referral” form has been received, the Audiologist will use the **Buff Colored** Report form and proceed as in part II.

The Buff colored form is to be used by the Audiologist when:

1. Evaluating a child referred from an NHS program without the original, hospital Completed, “Referral” form.  
or....

Any child under the age of 3 years newly identified with sensorineural hearing loss.  
(*This is for the purpose of tracking the prevalence of late-identified and late-onset hearing loss in children, as well as **assuring their enrollment with early intervention services.***)

2. Have parents sign release and give them a copy of the form.

#### IV. **When a child is diagnosed with deafness or hearing loss:**

*Please provide family with a copy of “**Help and Hope**” parents’ resource manual, and refer them to “**Idaho Hands and Voices**” parent support group (800-433-1323)*

**Mail or fax results within 10 days to:**

**Idaho Sound Beginnings Project (Fax 208-334-0952)**

**1720 Westgate Drive, Suite A Boise, ID 83704**

**Phone: 208-334-0983, 800-433-1323**